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**U.S. Department of Commerce
Patent and Trademark Office**

**DECLARATION FOR
UTILITY OR DESIGN
PATENT APPLICATION**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing

Attorney Docket Number	H 3540 PCT/US
First Named Inventor	KOESTER, Rita
COMPLETE IF KNOWN	
Application Number	09/831,432
Filing Date	07/30/2001
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CLEAR-RINSING AGENTS FOR MACHINE DISHWASHING

the specification of which

(Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY) **10/30/1999** as United States Application Number or PCT International

Application Number PCT/EP99/08289 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understood the contents of the above identified specification, including the claims, as amended by

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Having a filing date before that of the application on which priority is claimed.				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
198 51 453.0	DE	11/09/1998		

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION**Page 2**

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP99/08289	10/30/1999	

Additional U.S. or PCT International application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input type="checkbox"/> Firm Name OR	<input type="text"/>	Customer Number or label	<input type="text"/>
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List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
John E. Drach Steven J. Trzaska	32,891 36,296	Aaron R. Ettelman Henry E. Millson, Jr.	42,516 <u>18,980</u>

Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: Customer Number or label 23657 OR Fill in correspondence address below

Name	Aaron R. Ettelman		
Address			
Address			
City	State	ZIP	
Country	Telephone	610-278-4930	Fax
			610-278-6548

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: A petition has been filed for this unsigned

Given Name	Rita	Middle Initial		Family Name	Koester	Suffix e.g. Jr.	
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Inventor's Signature	<i>Rita Koester</i>	Date	05/08/2001
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Residence: City	Duesseldorf	State		Country	Germany	Citizenship	Germany
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Post Office Address Aachener Strasse 55

Post Office Address							
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City	40223 Duesseldorf	State		Zip		Country	Germany	Applicant Authority	
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Additional inventors are being named on supplemental sheet(s) attached hereto

DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetName of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor

Given Name	Ansgar	Middle Initial		Family Name	Behler	Suffix e.g. Jr.	
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Inventor's Signature	<i>Ansgar Behler</i>				Date	05/08/2001	
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Residence: City	Bottrop	State		Country	Germany <i>DEK</i>	Citizenship	Germany
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Post Office Address	Siegfriedstrasse 80						
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Post Office Address							
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City	46240 Bottrop	State		Zip		Country	Germany	Applicant Authority
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Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor

Given Name	Karl-Heinz	Middle Initial		Family Name	Schmid	Suffix e.g. Jr.	
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Inventor's Signature	<i>Karl-Heinz Schmid</i>				Date	05/08/2001	
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Residence: City	Mettmann	State		Country	Germany <i>DEK</i>	Citizenship	Germany
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Post Office Address	Stifterstrasse 10						
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City	40822 Mettmann	State		Zip		Country	Germany	Applicant Authority
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Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor

Given Name	Michael	Middle Initial		Family Name	Neuss	Suffix e.g. Jr.	
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Inventor's Signature	<i>Michael Neuss</i>				Date	05/08/2001	
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Residence: City	Koeln	State		Country	Germany <i>DEK</i>	Citizenship	Germany
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Post Office Address	Sesamstrasse 2						
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City	50997 Koeln	State		Zip		Country	Germany	Applicant Authority
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Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor

Given Name			Middle Initial		Family Name				Suffix e.g. Jr.	
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Inventor's Signature						Date			
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Residence: City			State		Country			Citizenship	
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City			State		Zip		Country			Applicant Authority	
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Additional inventors are being named on supplemental sheet(s) attached hereto